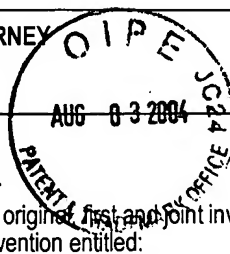


**COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY**  
(Includes Reference to PCT International Applications)

Attorney's Docket No.  
5482-2



As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**USE OF ARSENIC-CONTAINING PHARMACEUTICAL COMPOSITION IN COMBINATION WITH RADIATION THERAPY FOR CANCER TREATMENT**

the specification of which (check only one item below)

☐ is attached hereto

☒ was filed as United States application

Serial No. 10/803,666

on March 18, 2004

and was amended

on \_ (if applicable).

☐ was filed as PCT international application

Number

on

and was amended under PCT Article 19

on \_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

**PRIOR FOREIGN/PCT APPLICATIONS AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:**

Country (if PCT, indicate "PCT")	Application Number	Date of Filing (day, month, year)	Priority Claimed Under 35 U.S.C. 119	
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO

<b>COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY</b> (Includes Reference to PCT International Applications)			Attorney's Docket No. <b>5482-2</b>	
<b>POWER OF ATTORNEY:</b> As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) at <i>Cohen, Pontani, Lieberman &amp; Pavane</i> to prosecute this application and transact all business in the Patent and Trademark Office connected therewith  <p style="text-align: center;"><b>Customer number 27799</b></p>				
Send correspondence to <i>Cohen, Pontani, Lieberman &amp; Pavane</i> at the address for the following customer Number: <b>27799</b>			Direct Telephone calls to: (name and telephone number) <b>Kent H. Cheng</b> <b>(212) 687-2770</b>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.				
201	FULL NAME OF INVENTOR	FAMILY NAME LAI	FIRST GIVEN NAME Yuen-Liang	SECOND GIVEN NAME
	RESIDENCE, CITIZENSHIP	CITY Taipei	STATE OR FOREIGN COUNTRY Taiwan	COUNTRY OF CITIZENSHIP Taiwan
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 92 Chung Shan North Road, Section 2	CITY Taipei	STATE & ZIP CODE/COUNTRY Taiwan 104
202	FULL NAME OF INVENTOR	FAMILY NAME CHEN	FIRST GIVEN NAME Yu-Jen	SECOND GIVEN NAME
	RESIDENCE, CITIZENSHIP	CITY Taipei	STATE OR FOREIGN COUNTRY Taiwan	COUNTRY OF CITIZENSHIP Taiwan
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 92 Chung Shan North Road, Section 2	CITY Taipei	STATE & ZIP CODE/COUNTRY Taiwan 104
203	FULL NAME OF INVENTOR	FAMILY NAME HU	FIRST GIVEN NAME Yu-Fang	SECOND GIVEN NAME
	RESIDENCE, CITIZENSHIP	CITY 4F, 170 Min-Chuan E. Rd., Section 3	STATE OR FOREIGN COUNTRY Taiwan	COUNTRY OF CITIZENSHIP Taiwan
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 4F, 170 Min-Chuan E. Rd., Section 3	CITY Taipei	STATE & ZIP CODE/COUNTRY Taiwan 105
204	FULL NAME OF INVENTOR	FAMILY NAME KAN	FIRST GIVEN NAME Chi-Liang	SECOND GIVEN NAME
	RESIDENCE, CITIZENSHIP	CITY Taipei	STATE OR FOREIGN COUNTRY Taiwan	COUNTRY OF CITIZENSHIP Taiwan
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 4F, 170 Min-Chuan E. Rd., Section 3	CITY Taipei	STATE & ZIP CODE/COUNTRY Taiwan
205	FULL NAME OF INVENTOR	FAMILY NAME Chiu	FIRST GIVEN NAME Kuang-Chun	SECOND GIVEN NAME
	RESIDENCE, CITIZENSHIP	CITY Taipei	STATE OR FOREIGN COUNTRY Taiwan	COUNTRY OF CITIZENSHIP Taiwan
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 4F, 170 Min-Chuan E. Rd., Section 3	CITY Taipei	STATE & ZIP CODE/COUNTRY

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)			Attorney's Docket No. 5482-2
SIGNATURE OF INVENTOR 201 <i>Genan Liang Lai</i>	SIGNATURE OF INVENTOR 202 <i>Yu-Jen Chen</i>	SIGNATURE OF INVENTOR 203 <i>Yu-Tang Hu</i>	
DATE <i>July 7, 2004</i>	DATE <i>July 7, 2004</i>	DATE <i>July 7, 2004</i>	
SIGNATURE OF INVENTOR 204 <i>Chi-Liang Kan</i>	SIGNATURE OF INVENTOR 205 <i>[Signature]</i>	SIGNATURE OF INVENTOR 206	
DATE <i>July 7, 2004</i>	DATE <i>7/5/2004</i>	DATE	
Additional inventor(s) name(s) & address(es) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No			